ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | iD NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION | N.A |  | 08/29/01 |
| O.I.P.E. CLASSIFIER |  |  |  |
| FORMALITY REVIEW | BE | 897 | 10-05-01 |
| RESPONSE FORMALITY REVIEW |  |  |  |
|  |  |  |  |

## INDEX OF CLAIMS

| ✔ | ................................. Rejected | N | ................................. Non-elected |
|---|---|---|---|
| = | ................................. Allowed | I | ................................. Interference |
| — | (Through numeral)... Canceled | A | ................................. Appeal |
| ÷ | ................................. Restricted | O | ................................. Objected |